



U.S. SMALL BUSINESS ADMINISTRATION  
 WASHINGTON, D.C. 20416  
**Receiver for PROSPERO VENTURES, L.P.**  
 666 Eleventh Street, N.W. - Suite 200  
 Washington, D.C. 20001-4542  
 Telephone (202) 272-3617 FAX (202) 504-2247; 272-7701

**CERTIFIED MAIL NO. 7001 2510 0003 2422 4698**  
**RETURN RECEIPT REQUESTED**

May 9, 2005

Mr. Calvin Lee  
 HIGH GROWTH MANAGEMENT, LTD.  
 142 Belridge Drive  
 Los Gatos, CA 95032

RE: *USA v. PROSPERO VENTURES, L.P.*, Case No. C 04 - 4351,  
 US DC, Northern District of California, San Francisco Division

Dear Mr. Calvin Lee:

The Receiver has previously notified you that PROSPERO VENTURES, L.P. ("Prospero") was ordered into Receivership by the Order of the U. S. District Court for the Northern District of California (the "Receivership Court") entered October 20, 2004 (the "Receivership Order") in the captioned case, and that the U. S. Small Business Administration ("SBA") was appointed as the Receiver ("Receiver"). Paragraph 2 of the Receivership Order grants to the Receiver "... all powers, authorities, rights, and privileges heretofore possessed by the general partner, officers, directors, managers . . . of Prospero under applicable state and federal law and by the Agreement of Limited Partnership . . ." Another copy of the Receivership Order is enclosed.

In accordance with the Prospero (f/k/a ASCII Ventures, L. P.) Agreement of Limited Partnership, you committed to invest a total of \$124,752 in Prospero. Enclosed is a copy of the Investor Questionnaire Signature Page which was executed on behalf of your corporation. The records maintained by the prior management of Prospero, which have been provided to the Receiver, indicate that your capital commitment is unfunded in the amount of \$62,376.

The Receiver hereby makes demand on you for payment of the sum of \$62,376 in satisfaction of your unfunded capital commitment. You are required to forward payment in the full amount to the Receiver not later than June 17, 2005. Payment must be in the form of a bank cashier's check payable to

*SBA, Receiver for Prospero Ventures, L.P.*

SBA IS AN EQUAL OPPORTUNITY EMPLOYER AND PROVIDER

Mr. Calvin Lee  
HIGH GROWTH MANAGEMENT, LTD.  
May 9, 2005  
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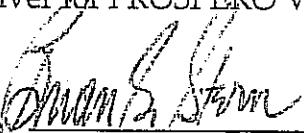
which should be mailed to the Receiver at the following address:

Brian S. Stern, Principal Agent  
SBA, Receiver for Prospero Ventures, L.P.  
666 Eleventh St., N.W. - Suite 200  
Washington, DC 20001-4542.

Your failure to make timely payment in full of your unfunded capital commitment will compel the Receiver to pursue all of its legal rights and remedies available.

Should you have any questions or wish to discuss this matter, feel free to write to the undersigned at the above address or call me directly at (202) 272-3604.

Sincerely,  
U.S. SMALL BUSINESS ADMINISTRATION  
Receiver for PROSPERO VENTURES, L.P.

By: 

Brian S. Stern  
Principal Agent for the Receiver  
Direct Tel: (202) 272-3604

Enclosure

cc: A. A. Speight, SBA O/L  
A. P. Messinger, Esq., SBA OGC

**DOTCOM VENTURES, L.P. (FORMERLY ASCII VENTURES, L.P.)**  
**INVESTOR QUESTIONNAIRE SIGNATURE PAGE**

The representations and warranties set forth herein, including the information set forth on this signature page, are true and accurate as of the date hereof and shall be true and accurate as of the date of sale of the Interest and shall survive such date. If at any time post-closing such representations and warranties shall not be true and accurate prior to sale of the Interest, the undersigned shall give immediate notice of such fact to the General Partner, specifying which representations and warranties are not true and accurate and the reasons therefor.

**HIGH GROWTH MANAGEMENT LIMITED**

**LEGAL NAME OF INVESTOR:**

**Type of Investor:** Please check the applicable box:

Individual  
 Corporation  
 Partnership

Trust  
 Other \_\_\_\_\_

The undersigned is either (i) an "employee benefit plan" as defined in §3(3) of the Employee Retirement Income Security Act of 1974, as amended ("ERISA") (including any plan that is exempt from Title I of ERISA pursuant to §4(h) of ERISA), (ii) a plan described in IRC §4975(e)(1) (including an individual retirement account or annuity), or (iii) any entity the underlying assets of which are deemed to include "plan assets" under ERISA.

Yes, the undersigned is one of the above.  
 No, the undersigned is not any of the above.

**Name and Address of  
primary contact person:**

Any 1a of Prominent Services Limited

15th Floor, Bank of East Asia Building,

10 Des Voeux Road Central, Hong Kong

**Telephone Number:**

(852) 25243558 or 25232060

**Fax Number:**

(852) 28450339

**Other persons who should receive  
Partnership correspondence:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Please specify your Tax I.D. Number &  
check the appropriate box:**

Tax I.D. No. \_\_\_\_\_  
 Exempt under IRC §401(a)  
 Exempt under IRS §501(c)(3)

**Total Capital Commitment:** \$ 100,000

*[Signature]*

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature <i>Mr. Calvin Lee</i></p> <p>B. Received by (Printed Name) <i>Lee</i></p> <p>C. Date of Delivery <i>15-17-08</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Mr. Calvin Lee HIGH GROWTH MANAGEMENT, LTD. 142 Belridge Drive Los Gatos, CA 95032</p>		<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7001 2510 0003 2422 4698</p>			

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-0381

4998  
2422  
2003  
0010  
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<b>U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)</b>	
<b>OFFICIAL USE</b>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted (Endorsement)	Mr. Calvin Lee HIGH GROWTH MANAGEMENT, LTD. 142 Belridge Drive Los Gatos, CA 95032
Total Postage	
Sent To	
Street, Apt. No.; or PO Box No. City, State, ZIP+4	

Postmark  
Here

PS Form 3800, January 2001  
See Reverse for Instructions